

Newsletter
February 2019



SARDA

Schizophrenia and Related Disorders Alliance of America



Happy
Valentines Day



Message from SARDAA, CEO

Dear Friends,

Please remember that each of us needs love and some who are sometimes more challenging to love, require it the most. The first person to love is yourself so you can share it with others.

Last week's event with LEAP was wait-listed and everyone had an impactful and extraordinary experience. More than 200 people were taught the powerful LEAP tools of communication so they are able to communicate and build relationships with people experiencing anosognosia. Dr. Robert Laitman was surrounded by caregivers and clinicians eager to learn more about appropriate treatments for psychosis. Dr. Laitman had the opportunity to run 8 – 16 miles per day – I have no idea how he manages. Sandy Dimiterchik presented the workshop for starting and building the support groups Schizophrenia Alliance: Psychosis Acceptance & Support and Families For Care. Susan Sheena and Laura Pogliano continued the workshop to build upon the Families For Care support group, building a Tool Chest to help provide resources for people diagnosed and their loved ones and how to establish a SARDAA State Chapter.

Dr. Tim Murphy has been very instrumental in working to secure connections and support in Washington, DC among the Legislators and with Paul Gionfriddo of MHA. Dr. Murphy has been very engaged as we prepare for a huge research undertaking.

Dr. William Lawson has arranged for us to speak at the Black Psychiatrists of America Conference regarding reclassification. This is the BPA's 50th Anniversary!

Our annual symposium and reception, "Broadway for the Brain" will be held on Monday, November 4, 2019 at the Westin Times Square, NYC. This will be an exhilarating and informative symposium and very special reception – SAVE THE DATE! Ticket Sales coming soon.

Very best,
Linda Stalters, MSN, APRN (ret)
Chief Executive Officer
Schizophrenia And Related Disorders Alliance of America



Message from FFC, Families for Care, Coordinator

I read a story which I related to the path we family and friends find ourselves on regarding our loved ones. It is titled "Welcome to Holland" and as I relate, it addresses the challenges and path when one's child is diagnosed with a chronic illness with resulting disability, and how to, most positively, traverse the path. It gives the analogy of the excitement and anticipation of visiting a foreign country but through certain circumstances finds oneself en route to a country not of one's choosing. The initial reaction is disbelief... rejection, but when it is realized that arriving at the country of choice isn't going to happen, a look around at the country of destination gives a chance for acceptance, subsequently revealing the positives of the new reality. And so it is

regarding our parenting, our partnering, with our loved ones who have been challenged with their unintended illness and ensuing new life, the need for us to come to terms, instead of remaining in a wishful mind state of the way things were, or in sadness. If you are a believer in the energies of life as I am, you understand that “Resistance tends to strengthen the energies it attempts to oppose by giving them power and energy to work against”, a quote which I value from 'Daily Om'; also expressed as 'that which we resist persists'. This allows us to see what potential positives this new life circumstance may offer. This guidance relates to the previously mentioned book 'The Gift of Adversity' by psychiatrist Norman Rosenthal M.D.; also what Shakespeare appeared to know and share, given his quote “the sweetness of adversity”. This is possible when one can look beyond the dark and seek what good there is. Within acceptance is the potential for peace as shown in the Serenity Prayer. Somehow in life I have been afforded the ability to see positives in potentially negative situations, and for this I am grateful. 'Welcome to Holland' can be read on the Web. This insightful piece was written by Emily Perl Kingsley, who is the Mother of a son born with Downs Syndrome. It has been helpful to numerous persons like us who are searching for guidance.

With Heart,
Mary Ross



Message from SA Staff Supporter

What is Recovery?

By Sandy Dimiterchik

I never heard the term “recovery” until I attended my first SA

(Schizophrenia Alliance Psychosis Support and Acceptance) conference call back in 2013. When I first heard it, I was skeptical because I thought of the literal meaning – getting over something. To me at the time, it seemed impossible to go back to where I was before my symptoms developed. I felt that it was unrealistic because I was told by my doctor that I could only work part-time and needed to be careful what activities I participated in.

Then I ordered the Blue Book, and I read the article on Aspects of Recovery, p. 24 in the 2018 edition. Here is what is there about recovery:

“What is recovery from a schizophrenia-related disorder? Perhaps the most obvious sign of recovering is the reduction and control of symptoms to the point of permitting one to have the ability to find and keep steady and structured activity. ... In SA, we believe that some level of recovery is achieved if the person is functioning at the person’s optimum level. ... is always an individual matter. ... Recovery from a schizophrenia-related disorder is a continuous process that can never be taken for granted. ... Constant vigilance and reality-checking is a fact of life for people with schizophrenia and related illnesses. ... Put simply, our hope is that all members will eventually enjoy the fullest life possible.” (Blue Book 2018, p.24-26)

Recovery means different things, depending on the severity of symptoms. People with schizophrenia or related disorders have a spectrum of symptoms, but what we have in common is our desire to get better, no matter what “better” means. SA has changed my life and my attitude about living with my illness. I am not alone. According to the Blue Book (2018, p. 6), thousands of lives have been helped in their recovery.

Join a SA group today! There are in-person support groups, conference calls, and a closed Facebook page. For more information, please contact me at 832-439-1586 or sandy.dimiterchik@sardaa.org.

Personal Story of SA Members

David M.

I went to a Schizophrenia Alliance meeting for about 10 years every Sunday, in Southfield Michigan. SA was a part of an effort I made at the time, along with a day program, to get a hold of my illness and begin to

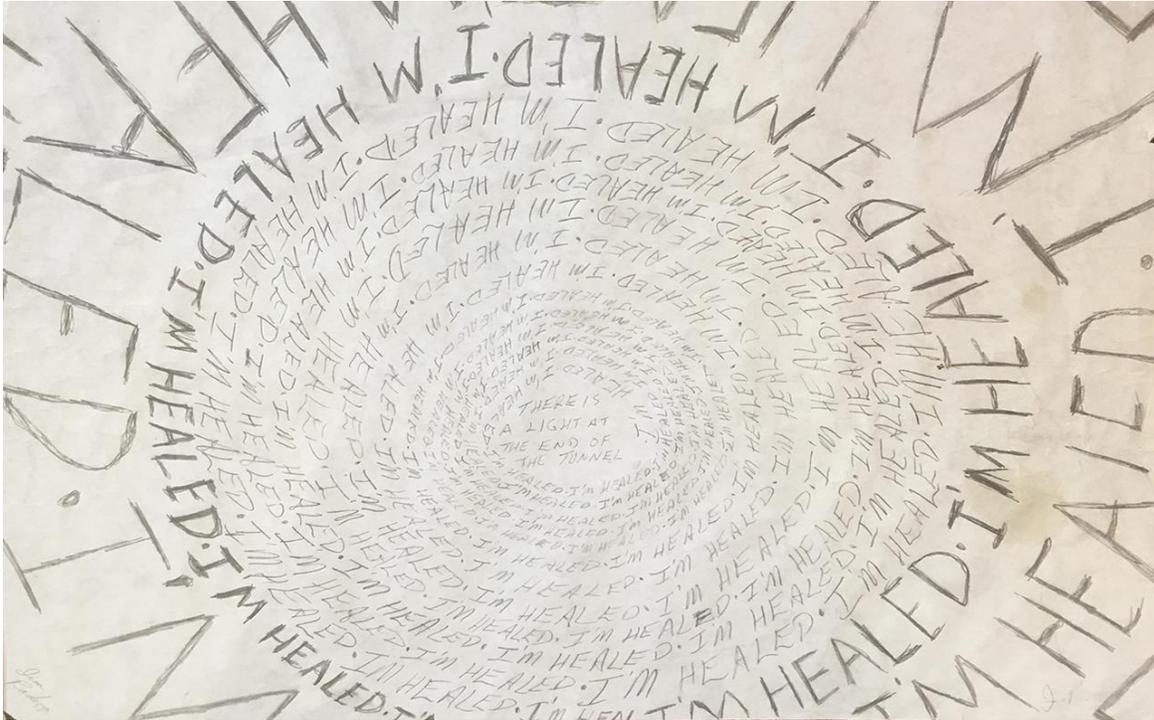
accomplish something in life. I had gone to art school in 1965-68 and had finally gotten my college degree in Humanities in 1980. But I had not started an actual exhibiting career as a sculptor. Finally, in 1988, I was in my first gallery group show. In the next years, the '90s and later, I was in 8 one man shows and in over 50 juried shows.

I had showings in the Detroit area; New York City; Minneapolis; Ithaca, New York and Denver, Colorado.

In 2000, both my parents began to get ill, and I went into a relapse. I had to take care of my parents and myself. Finally, my doctor changed my medication and I got better. Since then, I have begun to do Portrait Bust Commissions with less exhibiting. I am now working on a life size sculpture of a Dancer, which is being cast in Epoxy Fiberglass. Both my parents passed away, but somehow, I am getting by. I'm starting to get my feet back on the ground.

Since the SA meetings, I have gone to SA conferences and holiday parties. And some of the SA people still get together on New Year's Eve each year. A 30-year relationship with a lady friend has helped a lot. There is now a new supporter of SA, SARDAA.

I just turned 70 in the last four years, and things seem to be getting better. The type of artwork I do is getting more acceptance (figure sculpture). The economy in the Detroit area is improving. Everything that seemed negative before is somehow going over to the positive side. I am meeting the challenge of living by myself with new energy at this point in my life. My psychiatrist of 40 years is retiring at age 89. I am scheduled to start seeing the new one soon. Things just seem to be changing. For the better I hope.



- Artwork submitted by James R.

ParityRegistry  parityregistry.org

Denied coverage for mental health or addiction treatment?

Phone Support Groups
SA Conference Call Groups

Only for individuals diagnosed

Sundays - 7 pm Eastern Time

Mondays - 4 pm Eastern Time

Thursdays - 7 pm Eastern Time

Fridays - 7 pm Eastern Time

Saturdays - 1 pm Eastern Time

Spirit of SA Conference Call

For SA Leaders and Potential Leaders

First Wednesday of Each Month - 7 pm Eastern Time

Families For Care Conference Call

Not for individuals diagnosed

Every Tuesday - 7 pm Eastern Time

Toll-free Calls

Call-in information (855) 640-8271

Entry Code 88286491#

International Number (720) 362-6499

Facebook Support Groups

Only for individuals diagnosed

SARDAA Support

[JOIN The Facebook Group Here](#)

Only for Caregivers

SARDAA Families for Care

[JOIN The Facebook Group Here](#)

Diagnosed, Caregivers, Professionals

LOBBY CCAC - Circle of Comfort and Assistance Community

[JOIN The Facebook Group Here](#)

These are Closed groups, ask to be added.



Understanding Tardive Dyskinesia

What Is It, What Causes It, and Actions You Can Take to Get Help for It

This series of brief educational videos and commentaries features expert insight as well as comments from people who have lived with TD and their family members, to help you understand the risk factors for TD, recognize the early signs, and understand the importance of talking with your doctor about treatment.



To read personal stories from people who have been treated for TD, visit Patients.CMEInstitute.com

Schizophrenia Is a Brain Disease

Bethany Yeiser

January 17, 2019

Schizophrenia is a physical disease of the brain characterized by an imbalance of neurotransmitters and damaged brain tissue. Other diseases of the brain, such as Parkinson's Disease, Alzheimer's Disease, stroke and brain tumors also involve changes in brain tissue. In Alzheimer's Disease, structures called plaques and tangles cover the brain and alter normal function.

About 50% of individuals with Parkinson's Disease struggle with psychosis that often looks like schizophrenia. Schizophrenia commonly presents like an early onset Alzheimer's Disease, with a break from reality and cognitive deficits. Despite these similarities, schizophrenia is still called a mental illness while other brain diseases are classified as physical.

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Schizophrenia Patients Have Higher Levels of Antibodies Against Epstein-Barr Virus, Study Shows

Kate Anderton, B.Sc.

January 9, 2019

New research from Johns Hopkins Medicine and Sheppard Pratt Health System shows that people in the study with schizophrenia also have higher levels of antibodies against the EpsteinBarr virus (EBV), a herpes virus that causes infectious mononucleosis, so-called mono.

Researchers proposed two explanations for the association of heightened immune responses in patients with schizophrenia and EBV infection: schizophrenia might alter the immune systems of these patients and make them more susceptible to EBV, or EBV infection might increase the risk of schizophrenia.

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B-group Vitamins May Be Beneficial for People with First Episode Psychosis

James Ives, MPsych

January 16, 2019

B-group vitamins can improve concentration among people experiencing first episode psychosis B-group vitamins may be beneficial for maintaining concentration skills among people experiencing a first episode of psychosis, a study by researchers from Orygen

B-group vitamins may be beneficial for maintaining concentration skills among people experiencing a first episode of psychosis, a study by researchers from Orygen, the National Centre of Excellence in Youth Mental Health, has found.

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Cheap Common Drugs May Help Mental Illness

James Gallagher

Health and science correspondent, BBC News

January 9, 2019

It showed the number of times patients needed hospital treatment fell by up to a fifth when they took the drugs.

The researchers at University College London say their findings have "enormous potential".

But they, and independent experts, say the results now need to be tested in clinical trials.

The starting point for the researchers was a list of currently prescribed medications that science predicts could also help patients with severe mental health disorders.

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Clozapine Treatment and Discontinuation in Iceland: A National Longitudinal Study Using Electronic Patient Records

Oddur Ingimarsson, James H. MacCabe, Magnús Haraldsson, Halldóra Jónsdóttir & Engilbert Sigurdsson

August 4, 2016

Background: Clozapine is the only drug approved for treatment-resistant schizophrenia. There is evidence that clozapine is underutilized. **Aims:** To evaluate the initiation and discontinuation of clozapine at Landspítali University Hospital in Iceland and the prevalence of antipsychotic polypharmacy in clozapine-treated patients. **Methods:** The study is a part of an ongoing longitudinal study of schizophrenia in Iceland. We identified 201 patients on clozapine or who have been on clozapine by using a keyword

search in the electronic health records and by reviewing their medical records.

Results: Mean age at first treatment with clozapine was 37.8 years. Mean follow-up period on clozapine was 11 years. After 20 years of treatment 71.2% of patients were still on clozapine. After one year of treatment 84.4% of patients were still receiving clozapine treatment. We estimate that 11.4% of patients with schizophrenia in Iceland are taking clozapine and that 16% have been treated with clozapine at some point. Polypharmacy is common, since nearly 2/3, 65.6%, of patients taking clozapine use at least one other

antipsychotic and 16.9% are also receiving depot injections. **Conclusions:** We need to increase the awareness of psychiatrists in Iceland with regard to treatment with clozapine, since only about half of the estimated population of patients with treatment-resistant schizophrenia in Iceland have ever been treated

with clozapine. Nearly two thirds of patients who are prescribed clozapine in Iceland remain on it long-term.

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Adding Guanfacine Boosted Benefits of Cognitive Remediation Therapy in Schizophrenia Spectrum Disorder

Brain & Behavior Research Foundation

Adding the drug guanfacine to a proven therapy program to treat cognitive deficits led to even better results for individuals with schizotypal personality disorder, say researchers who have just published results of a small clinical trial in the American Journal of Psychiatry.

Results of the study, led by 2013 BBRF Young Investigator Margaret M. McClure, Ph.D., of the Icahn School of Medicine at Mount Sinai, appeared online January 18, 2019. The double-blind, placebo-controlled trial involved 28 patients, all diagnosed with schizotypal personality disorder (SPD), a schizophrenia spectrum disorder. Those with this diagnosis are usually socially isolated and suffer from perceptual distortions. Like schizophrenia patients, patients with SPD also frequently have cognitive impairments in such areas as verbal and spatial memory, attention, abstract reasoning, verbal fluency and verbal and spatial working memory—the short-term memory needed to perform tasks immediately at hand.

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Does Marijuana Use Cause Schizophrenia?

Benedict Carey

January 17, 2019

As the drug becomes more popular, concerns have been raised that its use can lead to psychotic disorders. Here's what scientists know for sure, and what they don't.

Cannabis plants in a lab at Niagara College in Niagara-On-The-Lake, Ontario. As marijuana use becomes more widespread and varied, some people worry that its more potent versions can cause or exacerbate mental illness.

Nearly a century after the film “Reefer Madness” alarmed the nation, some policymakers and doctors are again becoming concerned about the dangers of marijuana, although the reefers are long gone.

Experts now distinguish between the “new cannabis” — legal, highly potent, available in tabs, edibles and vapes — and the old version, a far milder weed passed around in joints. Levels of T.H.C., the chemical that produces marijuana’s high, have been rising for at least three decades, and it’s now possible in some states to buy vape cartridges containing little but the active ingredient.

The concern is focused largely on the link between heavy usage and psychosis in young people. Doctors first suspected a link some 70 years ago, and the evidence has only accumulated since then. In a forthcoming book, “Tell Your Children,” Alex Berenson, a former Times reporter, argues that legalization is putting a generation at higher risk of schizophrenia and other psychotic syndromes. Critics, including leading researchers, have called the argument overblown, and unfaithful to the science.

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Improvements in Pharmacological Study to Fight Cognitive Impairment in Schizophrenia

Alina Shrourou, BSc

January 17, 2019

The UPV/EHU University of the Basque Country is proposing improvements with respect to the pharmacological study of cognitive function enhancers in patients with schizophrenia.

A study by the UPV/EHU has assessed the effectiveness of various drugs, which are used to delay cognitive deterioration in patients with Alzheimer's, in improving cognitive impairment displayed by patients with schizophrenia. Through an analysis of nine clinical trials carried out worldwide, the researchers have specified a series of methodological improvements in the study of drugs that ensure the functional recovery of these patients.

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American Bar Association: Prisons are Housing Mental Health Patients Who've Committed No Crimes

Julianne Hill

January-February 2019 issue

Andrew Butler was a popular kid at Hollis Brookline High School in New Hampshire, an honors student who was captain of the football and wrestling teams.

Then, during college, Andrew tore his leg muscles, making even walking to class difficult. He started struggling with depression, and after talking with his dad, he decided to take time off from his chemical engineering studies at Worcester Polytechnic Institute in Massachusetts.

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CNN: ERs 'flooded' with Mentally ill Patients with No Place Else to Turn

CNN reported, "The extent to which ERs are now flooded with patients with mental illness is unprecedented." Indeed, this is one of the many negative consequences of too few accessible treatment options in too many places.

Treatment Advocacy Center has illustrated, the outcomes for those people who wind up in the -- boarding, patient dumping or "streeting", arrest -- are rarely good. The info-graphic on emergency department outcomes for people in psychiatric crisis, which is from our report, Beyond Beds: The Vital Role of a Full Continuum of Psychiatric Care.

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'Bedlam' Trailer: Sundance Docu Examines Cycle Of Horror In America's Mental Healthcare System

The Hollywood Reporter's review of "Bedlam," a documentary that examines the cycle of horror in America's mental healthcare system, calls it an eloquent combination of "intimate personal viewpoints, including the filmmaker's own." Sadly, the film highlights "how little true progress American society has made when it comes to treating people with severe mental illness."

The "Bedlam" trailer can be viewed in this Deadline article, [here](#). Treatment Advocacy Center worked closely with the filmmakers and look forward to seeing the film, which recently aired at the Sundance Film Festival, in its entirety!

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Sensorimotor Domain Added to the RDOC Framework

January 14, 2019

The National Institute of Mental Health (NIMH), part of the National Institutes of Health (NIH), has announced the addition of a new domain to the Research Domain Criteria (RDoC) framework. The aim of the new Sensorimotor domain is to help foster earlier and more precise identification of the role of motor systems disruptions in psychopathology and aid in the development of more effective treatments for people who are affected with these disruptions. The RDoC matrix is a tool for use by researchers to help them structure their study designs around behavioral or cognitive concepts. The most recent change to RDoC added a new domain—the Sensorimotor domain—to the five already included in the matrix: Negative Valence Systems; Positive Valence Systems; Cognitive Systems; Social Processes; Arousal and Regulatory Systems.

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New Findings Reveal Surprising Role of the Cerebellum in Reward and Social Behaviors

January 17, 2019

A new NIMH-funded study in rodents has shown that the brain's cerebellum—known to play a role in motor coordination—also helps control the brain's reward circuitry. Researchers found a direct neural connection from the cerebellum to the ventral tegmental area (VTA) of the brain, which is an area long known to be involved in reward processing and encoding. These findings, published in *Science*, demonstrate for the first time that the brain's cerebellum plays a role in controlling reward and social preference behavior, and sheds new light on the brain circuits critical to the affective and social dysfunction seen across multiple psychiatric disorders.

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All of Us Research Program Expands Data Collection Efforts with Fitbit

January 16, 2019

The NIH All of Us Research Program has launched the Fitbit Bring-Your-Own-Device project. Now, in addition to providing health information through surveys, electronic health records, and biosamples, participants can choose to share data from their Fitbit accounts to help researchers make discoveries. The project is a key step for the program in integrating digital health technologies for data collection.

Visit [HERE](#)

New NIMH Video Series Highlights Mental Health Research

As the lead federal agency for research on mental disorders, NIMH's mission is to transform the understanding and treatment of mental illnesses through basic and clinical research, paving the way for prevention, recovery, and cure. In an effort to educate and inform the public about the NIMH mission, scientific initiatives, and advances in the science of mental illness, NIMH is launching a new video series called "Discover NIMH." These short videos cover: suicide prevention research; early identification, intervention, and prevention research; basic research; and training the next generation of mental health scientists.

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NIH Research matters: Physical Activity May Reduce Depression Symptoms

The January 15 issue of NIH Research Matters highlights findings from a study, partly funded by NIMH and co-led by NIMH scientist Dr. Kathleen Merikangas, showing that sleep problems, a lack of energy, and physical inactivity may lead to a depressed mood and mood changes. The findings suggest that physical activity could be an effective target for strategies to change mood states.

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The Dish (2019): New Year, New All of Us Research Program Updates

In this video blog, All of Us Research Program Director Eric Dishman discusses areas of focus for the program in 2019.

Visit [HERE](#)

Update from the Office on Women's Health: Could it Be a Mental Health Condition?

This update from the U.S. Department of Health and Human Services' Office on Women's Health (OWH) discusses the mental health conditions that are more common among women and how mental health conditions affect women differently.

Visit [HERE](#)

Update from the Office on Women's Health: Help a Friend Thinking About Suicide

This OWH update offers six ways to help someone who is thinking about suicide.

Visit [HERE](#)

VA, Health and Human Services Announce Governor's Challenge to Prevent Suicide

The U.S. Department of Veterans Affairs (VA) and SAMHSA are launching the Governor's Challenge to Prevent Suicide among Service Members, Veterans, and their Families. Seven states will participate in the Governor's Challenge, including Arizona, Colorado, Kansas, Montana, New Hampshire, Texas, and Virginia. State leaders will work together to develop a plan to implement the National Strategy for Preventing Veteran Suicide.

Visit [HERE](#)

VA's Make the Connection: You Are Not Alone

This VA blog post highlights MakeTheConnection.net, an online resource designed to connect Veterans, their family members and friends, and other supporters with information, resources, and solutions to issues affecting their lives. MakeTheConnection.net features videos of Veterans sharing their personal experiences, what they went through, and how they recovered.

Visit [HERE](#)

Find Clinical Trial Participation by State: [HERE](#)



[Schizophrenia Health Storylines™ Mobile App](#)

Now it is easy to record details and specifics about symptoms, medication, moods, and more. Choose what you want to track, and see all the information you need to help you or your loved one who is living with schizophrenia and related disorders.

[Get the Schizophrenia Health Storylines™ Mobile App Today!](#) The mobile app is FREE for all users on iOS and Android devices. There is also a web version available, accessible through the browser of any desktop computer or mobile device. [Download the app today!](#)

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By choosing Schizophrenia and Related Disorders Alliance of America as your charity on smile.amazon.com, Amazon will donate 0.5% of your eligible purchases to Schizophrenia and Related Disorders Alliance of America.

Please take a moment to find out how you can help support SARDA, not only today but every day - **at no extra cost to you!!**

IT'S SO SIMPLE: just bookmark this link <http://smile.amazon.com/ch/33-1213657>, start shopping and support us every time you shop.

Shop with **PayPal** and choose **SARDA** to Donate with PayPal Giving Fund to help support SARDA.

Texas and Louisiana Friends: Re-Enroll Your Kroger Plus Cards



You can support SARDA without spending a penny! Register Schizophrenia and Related Disorders on your Kroger Plus Card and they will donate a percentage to SARDA each time you use your card.

Please register online at www.krogercommunityrewards.com
Link to: Schizophrenia and Related Disorders–Kroger Plus CardXA142

Help Change Lives -- Donate Now

Thank you to those who already made a donation.
Every contribution makes a difference.





Sincerely,
Jordan Helwig, Creative Designer
Angel White, Editor